

California Morbidity

State of California Gray Davis, Governor

The California Tobacco Control Program Series Article 3: Tobacco Excess...Tobacco Access

Background

This is the third in a series of three articles on the efforts of the California Tobacco Control Program, the program established and supported by Proposition 99, the Tobacco Tax and Health Protection Act. The purpose of this article, like that of the first two, is to report on progress made in California since January 1, 1989, toward reducing the use of and changing of the social norms about tobacco; specifically, progress toward addressing the problems of tobacco industry marketing and youth access to tobacco products will be discussed. As in the first two articles, as well, particular attention will be paid to the CDHS program: the Tobacco Control Section (TCS) of the Cancer Control Branch, Division of Chronic Disease and Injury Control.

Introduction

As was mentioned in the first two articles in this series, it is TCS contention that when program efforts, implemented properly within suitable populations and having one or more of three primary foci -- creating smoke-free environments around California; reducing or eliminating youth access to tobacco products; and countering pro-tobacco influences -- (along with the potential for positive interaction) are successful, changes in attitudes, perceptions, and norms of California youth and adults (and organizations) will follow. Furthermore, these social norm changes will ultimately lead to reductions in smoking prevalence and consumption, the "harder" measures tracked by TCS -- those markers (i.e., behaviors) which lead to tobacco related disease and premature death. In the first article, the degrees to which these "harder" measures have been changing were quantified. As in the last article (i.e., the second in this series of three), data from "behind the scenes" are presented. In other words, analogous to focusing on the assessing/changing of dietary habits for the purpose of cardiovascular disease prevention (read: the diet/heredity-hypercholesterolemia-cardiovascular disease three stage process), this article focuses on the assessing/changing of attitudes for the purpose of tobacco-related disease prevention (read: the attitudes/social norms-active/passive smoker-tobacco related disease three stage process).

Methodology

In tracking the "behind the scenes" outcome measures of TCS programmatic effects with respect to addressing tobacco industry marketing and youth access to tobacco products (i.e., tracking the related attitudes of and tobacco industry marketing practices directed toward California (adults and) youth), three kinds of analysis were performed: first, using attitudinal data collected via the California Adult Tobacco Survey, cross-sectional descriptive analyses (for a given point in time) were performed. Determining descriptive statistics meant tallying the percentages of respondents who agreed or disagreed with statements posed by an interviewer while excluding unknowns and refusals from the analyses.

The second kind of analysis was a surveillance/advocacy activity, entitled Operation Storefront, designed to:
(a) involve hundreds of youth and adult volunteers in a detailed survey of tobacco related point of purchase advertising and promotional practices in more than 5,700 retail establishments across California; and (b) generate local action against these tobacco industry-engineered practices, based on the survey findings. The Operation Storefront data were analyzed to describe how many advertisements and promotions confront youth in areas and establishments they frequent.

A third analysis described illegal sales of tobacco products to kids -- an analysis mandated by the STAKE (Stop Tobacco Access to Kids Enforcement) Act. The STAKE Act established annual undercover investigations of tobacco retail establishments (randomly selected across the state) wherein kids (aged 15 or 16 years), by following the STAKE tobacco purchase protocol, ascertain the proportion of stores (by type and the characteristics of the clerks within those stores) willing to sell tobacco to youth.

Results

First, attitudinal data are presented (Table 1): data for 1996, 1997 reveal that overwhelming proportions of adult respondents feel that preventing teenagers from smoking is very important (96.1%); that local communities should play a part in prohibiting youth access to tobacco (96.3%); that advertising by tobacco companies influences youth (77.4%); and that licensure of tobacco retailers may be part of the solution (79.7%).

Table 1. The Percentages of Respondents Who Agree With
Youth Access to Tobacco Images and Products related TCS Constructs

TCS Construct	Percentage
Preventing teenagers from smoking is very important.*	96.1
Local communities should strongly enforce youth access laws.	96.3
Tobacco advertising campaigns influence youth uptake of tobacco products.	77.4
Tobacco retailers should be required to possess a license to sell tobacco.	79.7

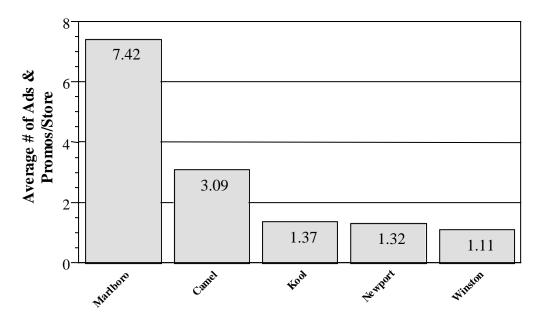
^{*} Compilation of 1996 responses since question was discontinued in 1997 Source: California Adult Tobacco Survey (CATS) - CDHS

Prepared by: Tobacco Control Section, California Department of Health Services, 1997

Second, Operation Storefront data are presented: with respect to the number of advertisements and promotional items of each of the major brands per retail store (Figure 1), Marlboro was the most heavily advertised with 7.42 per store, followed by Camel with 3.09 per store, and Kool, Newport, and Winston, each with slightly more than one per store. Next, with respect to where heavy advertising was placed, stores which are located within one thousand feet of schools had a higher average number of advertisements and promotional items (per store) than did those stores beyond the thousand foot radius (Table 2). Finally, Figure 2 presents data on (a) the height at which advertisements and promotional items were placed within stores and (b) the proximity of the advertisements and promotional items to candy. Again, stores close to schools (versus those not close to schools) were more likely to place tobacco advertisements and promotional items at the eye level of children and near candy.

Figure 1. Average Number of Tobacco Ads and Promos per Store

By Brand



Source: Operation Storefront, 1995

Prepared by: Tobacco Control Section, California Department of Health Services, 1997

Table 2. Average Number of Tobacco Advertisements and Promotional Items per Store By School Proximity

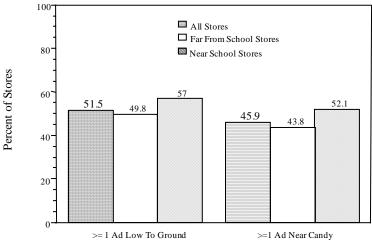
School Proximity	Average # of Ads and Promos
Near Schools (<=1000 feet)	26.2
Far From Schools (>1000 feet)	24.6

Source: Operation Storefront, 1995

Prepared by: Tobacco Control Section, California Department of Health Services, 1997 Note: p-value for school proximity is less than 0.05

Figure 2. Percent of Stores with Ads and Promos Placed Strategically

By Proximity to Schools



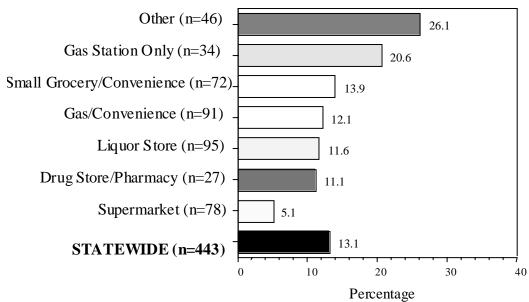
Source: Operation Storefront, 1995

Prepared by: Tobacco Control Section, California Department of Health Services, 1997

Note: p values for elevation and proximity to candy are less than $0.001\,$

Third, STAKE Act provide information on the clerks who (and the stores which) were willing to sell tobacco products to youth. First, Figure 3 indicates that in 1998 13.1% of California stores were willing to sell tobacco products to kids. Moreover, stores most likely to sell tobacco to kids in the "other category" were discount stores, restaurants and donut shops.

Figure 3. Percentages of Stores With Illegal Tobacco Sales*
California, 1998



^{* -} Actual Sale Protocol

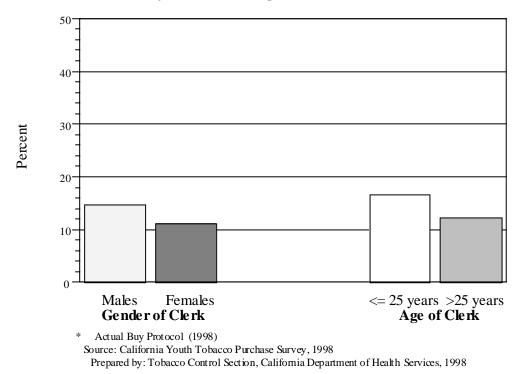
Source: California Youth Tobacco Purchase Survey, 1998

Prepared by: Tobacco Control Section, California Department of Health Services, 1998

Finally, Figure 4 shows the characteristics of the clerks who sold to the kids: male clerks were more likely to sell to kids than were female clerks; furthermore, clerks who were perceived as younger were more likely to sell to kids than were clerks who were perceived as older.

Figure 4. Percent of Clerks Willing to Sell Tobacco Products to Youth*

By Gender and Age, California, 1998



Conclusions

Three major conclusions are drawn from these results: (1) based on the analysis of attitudinal data, Californians overwhelmingly feel that the youth should be not be exposed to tobacco products or tobacco-related images; (2) based on the analysis of Operation Storefront data, youth are constantly being exposed to the tobacco-related images; and (3) youth can purchase tobacco products in one of seven purchase attempts.

In sum, Californians feel that the tobacco excess and tobacco access are of great public health concern. These data are clear, but the problem persists, due in large part to dominant tobacco industry financial and political interests.

Therefore, the solution is simple, though the process, unfortunately, is not. CTCP, together with its constituents, must continue to work toward the achievement of reducing tobacco excess and tobacco access. In other words, as was stressed in the first two articles of this series, not until tobacco use is an historical phenomenon can CTCP and similar efforts cease.

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Note to Authors: Articles should be submitted to CM Editor, DCDC, CA Department of Health Services, 2151 Berkeley Way, Berkeley, CA 94704. Length should be approximately 1000 words or less. Tables, figures, and other materials can be included as supplements. Submit typed, double-spaced hard copy of text and tables along with electronic copies, preferably in Word or Wordperfect, Macintosh or Windows, on a floppy disk. Graphics may be in a graphic format. Acknowledgments as to source will be provided, and may be individuals and/or programs as suggested. Publication in *CM* should not preclude publication elsewhere.